## SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

PAGE 50 OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c Detailed Summary Page 12 13a 13b

11d

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	the name and address of any political committee	
NAME OF COMMITTEE (In Full) WESTERMAN FOR CONGRE		
Full Name (Last, First, Middle Initial) DR. JACK STERNBERG  Mailing Address 137 BRECKLING CIRCLE		Date of Receipt
City	State Zip Code	06 18 2014
HOT SPRINGS	State Zip Code AR 71901	Transaction ID : SA11AI.5902
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation PHYSICIAN	2600.00
Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 3100.00	
Full Name (Last, First, Middle Initial)  MRS. MARILYN STERNBERG  Mailing Address 427 RESCHANG CIR		Date of Receipt
Mailing Address 137 BRECKLING CIR		06 18 2014
City HOT SPRINGS	State Zip Code AR 71901	Transaction ID : SA11AI.5861
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer HOMEMAKER	Occupation HOMEMAKER	2600.00
Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date  2600.00	
Full Name (Last, First, Middle Initial) DR. JASON G. STEWART		Date of Receipt
Mailing Address 5201 NORTHSHORE DRIVE		06 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City NORTH LITTLE ROCK	State Zip Code AR 72118	Transaction ID : SA11AI.6472
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer ARKANSAS SURGICAL HOSPITAL LLC	Occupation PARTNER	202.35 PARTNERSHIP ATTRIBUTION - ARKANSAS
Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 202.35	SURGICAL HOSPITAL LLC [MEMO ITEM]
SUBTOTAL of Receipts This Page (optional)		5200.00
TOTAL This Period (last page this line number		